PATENT APPLICATION FEE DETERMINATION RECORD

ctive December 8, 2004

Application or Docket Number 1 0 / 5 2 1 9 6

CLAIMS AS FILED - PART I								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
<u> </u>			(Column 1)		((Colùmn 2)	I	ITPE	<u></u>	UK 1	SMALL	ENTITY	
U.S. NATIONAL STAGE FEES								RATE	FEE]	RATE	FEE	
BÁSIC FEE			SMALL ENT. = \$ 150		LAR	GE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE		
EXA	MINATION FE	E	Satisfies PCT Article 33(1)- (4) = \$ 50 / \$ 100			ther situations = 100 / \$ 200		EXAM. FEE			EXAM. FEE		
SEARCH FEE			U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400			ther situations = 250 / \$ 500		SEARCH FEE			SEARCH FEE		
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =		X \$ 125 =		:	X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			l u	minus 20 = •				X \$ 25 =		OR	X \$ 50 =		
IND	EPENDENT CL	AIMS) minus 3 = .					X \$ 100 =	·	OR	X \$ 200 =		
MU	TIPLE DEPEN	DENT CLAIM PR	ESENT					+ \$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL E		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHI NUME PREVIO PAID I	BER XUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	. **		=		X \$ 25 =		OR	X \$ 50 =		
	Independent		Minus	***	-	=		X \$ 100 =		OR	X \$ 200 =		
,	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				MIAL		İ	+ \$ 180 =		OR	+ \$ 360 =		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
8 H		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIR				MIAL			+ \$ 180 =		OR	+ \$ 360 =		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".													
	The "Highest Nur	mber Previously Paid	For (Total or I	ndependent) is	the hig	hest number found in	n the	appropriate box	in column 1.				